09688983 - GAU: 3695

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Complete if Known Substitute for form 1449/PTO Application Number 09/688,983 Filing Date 10/17/2000 INFORMATION DISCLOSURE First Named Inventor Jeff S. Eder STATEMENT BY APPLICANT Art Unit 3693 (Use as many sheets as necessary) Harish T. Dass Examiner Name Attorney Docket Number AR - 12 Sheet

			U. S. PATENT	F DOCUMENTS	
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ^{2 (# known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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Examiner Signature	/Harish Dass/ (01/30/2012)	Date Considered	

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Complete if Known Substitute for form 1449/PTO Application Number 09/688,983 Filing Date 10/17/2000 INFORMATION DISCLOSURE First Named Inventor Jeff S. Eder STATEMENT BY APPLICANT Art Unit 3684 (Use as many sheets as necessary) Harish T. Dass Examiner Name Attorney Docket Number AR - 12 Sheet

Examiner	Cite	Document Number	Publication Date	F DOCUMENTS Name of Patentee or	Pages, Columns, Lines, Where
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Substitut	Substitute for form 1449/PTO		Complete if Known		
1				Application Number	09/688,983
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¹ Applicant's unique citation designation number (optional). 2 Applicant is to place a check mark here if English language Translation is attached. This collection of information is required by 37 CFR 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO:**Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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INFO	ORMATION	DIS	CLOSURE	Filing Date	10/17/2000	
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Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Filing Date	10/17/2000	
				First Named Inventor	Jeff S. Eder	
				Art Unit	3693	
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